Public Service Commission of South Carolina

101 Executive Center Dr., Suite 100

Phone: 803-896-5100 Fax: 803-896-5199

Www.psc.sc.gov

000 2012 Email form to: contact@psc.sc.gov

Required Fields

Date: *

Columbia, SC 29210

Letter of Protest

2012 - 177 - WS in Docket



Protestant Information: GISELE PERROTTA AND RICHARD MILLS Name * Mailing Address * 917 KNOB CREEK LN City, State Zip * TEGA CAY SC 29708 Phone * 803 547-3899 RAMGER® COMPORIUM. NET E-mail

1. What is your connection or interest in this case? * For example, are you a customer of the Company that is the subject of this pending proceeding? (This section must be completed. Attach additional information if necessary.)

CUSTOMERSOF COMPLAY SUBJECT OF THIS PENDING PROCEEDING

2. Please give a concise statement of your protest. * (This section must be completed. Attach additional information if necessary.)

STRONGLY OBJECT TO UNRERSONABLE INCREASE IN PATE. THEY WERE PREVIOUSLY GRANTED AN INCREASE TO AM PROVER. THERASTRUCTURE IN 2010 EN THE AMOUNT OF 18 90. THIS SHOULD HAVE PROVIDED ASEQUATE FUNDING TO RECOVER THEIR COST FOR REPAIRS, ETC.

3. Do you wish to make an appearance at a hearing in this proceeding , if scheduled, and offer sworn testimony? *

NO

PROPER

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applicable)						
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) 	RAMGERE) COMPORI	um.NET			
connection of	of Service	Payment Arr Meter Issue	rangements	Water Quali		efusal to Connect Service ine Extension Issue
Other (be specific) OBJECT 70 UIV REASONABLE PATE IN CREASE						
u contacte	d the Office of Re	egulatory Staff	(ORS)? * Yes	IVI No.		
Statemer	nt of Racts/Com	mlaint• * (Thic	s section must be cou	mpleted Attach additi	onal information to the	nia nago if nocessor.
HOULD OF RE	TO TO HAVE PR PAIRS, ETC.	EM PAO	VE TNERA: DECOUATE FOR	STRUCTURE. VD (NG TO K	TH 2010. PECOVER 174.	AN ENCREASE THIS INCREASE EIR COST
VOE Y	ORK EARONTA FRICA))) HAA) MILLS verifi			0/17/12	Internal Use Only Processed By Date
	ainant or applicable) Address * ate Zip * of Utility OTE: If A f Complaing Error/A connection of the Issue of (be specific used) Contacted Statement Contacted Conta	Address * 9/7 KNOB Content of Part of CAR CAR RAM GER CONTENT OF SOUTH CAROLINA	Address * 9/7 KNOB CAEEK WARD TECH CAY REAM GERE COMPORTO Of Utility Involved in Complaint: * OTE: If AT&T is the utility involved, please of Complaint (check appropriate box below ing Error/Adjustments Deposits and connection of Service Payment Arr ice Issue Meter Issue or (be specific) OBTECT TO UNRESSE ESTATEMENT OF FRONT DED AND SHOULD HAVE PROVIDED AND OF REPAIRS, ETC. DESCRIPTION OF REQUEST OF SOUTH CAROLINA OF YORK OF SOUTH CAROLINA OF YORK	Address * QID KNOB CAFEN WV Address * QID KNOB CAFEN WV ATE ZIP * TEGA CAY SC D970 ATE ZIP * TEGA CAY SC D970 OTE: If AT&T is the utility involved, please complete the attack of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustments Deposits and Credit Establishment of Complaint (check appropriate box below.) * Ing Error/Adjustment (check appropriate box below.) * Ing Error/Adjustment (check appropriate box below.) * Ing Error/Adjustment (check appropriate box below.) * Ing Err	Alexandror Legal Representative Information: **Required Fields Complementary Complementary	Albant or Legal Representative Information: *Required Fields *GISELE PERROTTH AND RICHARD MILLS applicable) Address * 917 KNOS CAFEK LIV the Zip * TEGA CAY SC 29708 Phone * BO3 547 - RIFM GETE COM PORTUM. NET of Utility Involved in Complaint: * TEGA CAY WATER SERVICE OTE: If AT&T is the utility involved, please complete the attachment located at the end of this form. I Complaint (check appropriate box below.) * IN GETO/Adjustments Deposits and Credit Establishment Wrong Rate Reposition of Service Payment Arrangements I consection of Service Department Arrangements I water Issue I water Issue I water Issue I water User Carlot I water Issue I wontacted the Office of Regulatory Staff (ORS)? * Use No Name of ORS Contact: Statement of Facts/Complaint: * (This section must be completed. Attach additional information to the Carlot of Attach Additional Information to the Carlot of Attach Additional Information to the Carlot of Attach Additional Information to this page if necessary.) THE IN ORBITE REQUEST SHOULD BE RESIDENTED. REQUESTED IN ORBITE TO BE REPRESENTED. REQUESTED OF REPAIRS, ETC.